

DIRECTOR OF CENTRAL INTELLIGENCE
Scientific and Technical Intelligence Committee

1 September 1978

MEMORANDUM FOR: Chief, Compensation Division, Office of Finance

THROUGH : Chief, Contract Personnel Division, Office of Personnel

SUBJECT : Memorandum of Oral Understanding With Members of DCI's S&T Advisory Panel (STAP)

REFERENCE : My memo to you, same subject, of 9 January 1978

STATINTL 1. This document will serve as a memorandum in lieu of contract for [REDACTED] STATINTL
STATINTL [REDACTED] when approved by the Special Contracting Officer, Office of Personnel.

STATINTL

2. The memorandum in lieu of contract for [REDACTED] dated 9 January 1978 was approved through 30 April 1978. I request that that date be extended until 30 September 1978.

STATINTL

STATINTL

3. [REDACTED]

STATINTL

[REDACTED] is serving a four year term on the DCI's S&T Advisory Panel under the following financial arrangements. He is paid a fee for each day's service equivalent to the top step of a GS-15 (currently \$180.88) and travel expenses. His address is:

STATINTL [REDACTED]

I request that this memorandum in lieu of contract cover expenses incurred thus far and until 30 September 1978.

4. Payments for [REDACTED] will be charged to FAN 87-159802.

STATINTL

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Approved For Release 2001/03/04 : CIA-RDP80T01198A000100010004-5

SUBJECT: Memorandum of Oral Understanding With
Members of DCI's SGT Advisory Panel
(STAP)

5. All STAP members are being processed so that they will in FY 1979, starting 1 October 1978, become contractor/consultants and have formal contracts replacing this and other memoranda in lieu of contracts

STATINTL [REDACTED]

[REDACTED] Executive Secretary

STATINTL

/s/ [REDACTED]

APPROVAL: Special Contracting Officer/OP

1 SEP 1978

DATE : _____

Distribution:

Orig. & 1 - Addressee
1 - C/CPD/OP
1 - CPD/SCO/OP
1 - C/SS/ICS
1 - OSI/B&F
1 - STAP (Chrono)
1 - STAP (Finance)

OSI/STIC/ [REDACTED] /dec/4170 (1Sep78) STATINTL

Approved For Release 2001/03/04 : CIA-RDP80T01198A000100010004-5

ADMINISTRATIVE - INTERNAL USE ONLY

DIRECTOR OF CENTRAL INTELLIGENCE
Scientific and Technical Intelligence Committee

30 August 1978

MEMORANDUM FOR: Chief, Support Staff, ICS
SUBJECT : Reimbursement for STAP Expenses

1. Attached are claim sheets of members of the DCI's Science and Technology Advisory Panel (STAP) for the 26-27 July 1978 meeting and dinner at the Cosmos Club.
2. The breakdown of the costs is as follows (work-sheet attached):

a. Panelists	\$ 3551.50
Travel	1620.03
Services	1537.48
Miscellaneous	393.99
b. Meals	
7/26 Lunch DCI Dining Room	22.88 (8)
7/27 Lunch DCI Dining Room	23.10 (6)
7/26 Dinner Cosmos Club	108.08 (7)
8/16 Dinner (Washington Golf & Country Club)	11.13 (1)
	165.19
TOTAL	3716.69

3. I hereby certify that I expended \$165.19 for official entertainment of guests of the Intelligence Community on 26-27 July and 16 August 1978. I have not been and will not be reimbursed for these expenses from any other source. All Intelligence Community employees involved in this entertainment paid their own expenses.

ADMINISTRATIVE - INTERNAL USE ONLY

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Page two

SUBJECT: Reimbursement for STAP Expenses

4. Please send the STAP members' checks to them in plain envelopes to the addresses on the claim sheets, inasmuch as some of them are sensitive regarding their association with the Intelligence Community. Please send the check for my expenses (item 2b above) to me at Room 6F35, Headquarters Building.

5. The next meeting of STAP is scheduled for 14-15 September and the estimated cost will be approximately \$3600.00.

Signed

STATINTL

[REDACTED] Executive Secretary

Attachments: As Stated

Distribution:

Orig. & 1 - Addressee, w/atts
1 - STAP Chrono, wo/atts
✓ - STAP Finance, w/atts

OSI/STIC/[REDACTED]/dec/4170 (30Aug78) STATINTL

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ADMINISTRATIVE - INTERNAL USE ONLY

Worksheet

STAP Meeting 26-27 July 1975

STATINTL	Travel	Salaries	Entertainment	Meals	Total
	216.25	361.76		103.25	711.26
	214.43	361.76		84.72	660.91
	210.00	-		140.12	350.12
	50.10				140.54
	435.25	180.88	90.44		666.13
		361.76			361.76
AIA		180.88		65.10	479.96
	-	180.88	-	-	180.88
	1620.03	1447.04	90.44	393.99	3551.50
			1532.48		

Lunches 7/26 5 @ 2.60 = 20.00 + 2.60 = 22.60 JM

7/27 6 @ 3.50 = 21.00 + 2.60 = 23.10 JM 45.80

Dinner 7/26	7 @ 15.99	AM	108.93
8/15	1 @ 11.13	N	11.13

Collect Donkey

Coffee	2.89	5 @ coffee first. (already paid)
Donuts	9.85	12.74

29 Aug 1978

EXECUTIVE DINING ROOM

Date 7/26

ITEM NO.	ITEM	PRICE
<input type="checkbox"/> 1	Regular Lunch*	\$2.60
<input type="checkbox"/> 2	Steak Delmonico Lunch*	\$3.45
<input type="checkbox"/> 3	Steak Sirloin Lunch*	\$3.45
<input type="checkbox"/>	- - - - -	- - - - -
<input type="checkbox"/> 4	Filet Sandwich	\$3.15
<input type="checkbox"/> 5	Light Lunch	\$1.65
<input type="checkbox"/> 6	Jumbo Salad	\$1.45
<input checked="" type="checkbox"/> 7	Low Cal	<u>1.74</u>
<input checked="" type="checkbox"/> 8	Soup	<u>6.00</u>
<input checked="" type="checkbox"/> 9	Salad — Vegetable	<u>4.80</u>
<input checked="" type="checkbox"/> 10	Dessert	<u>.40</u>
<input checked="" type="checkbox"/> 11	Milk	<u>.25</u>
<input checked="" type="checkbox"/> 11	Coffee	<u>3.00</u>
<input checked="" type="checkbox"/> 11	Tea	<u>2.20</u>
<input checked="" type="checkbox"/> 11	Juice	<u>2.20</u>
<input type="checkbox"/> 12	Misc.	\$2.00

*Includes salad or vegetable, juice, coffee, or tea.

Membership Acct. # 42007Signature 571eRoom No. 571eReceipt Requested

EXECUTIVE DINING ROOM

Date 7/27

ITEM NO.	ITEM	PRICE
<input checked="" type="checkbox"/> 1	Regular Lunch*	<u>31.24</u>
<input type="checkbox"/> 2	Steak Delmonico Lunch*	\$3.45
<input type="checkbox"/> 3	Steak Sirloin Lunch*	\$3.45
<input type="checkbox"/>	- - - - -	- - - - -
<input type="checkbox"/> 4	Filet Sandwich	\$3.15
<input type="checkbox"/> 5	Light Lunch	\$1.65
<input type="checkbox"/> 6	Jumbo Salad	\$1.45
<input type="checkbox"/> 7	Low Cal	\$1.45
<input checked="" type="checkbox"/> 8	Soup	<u>1.60</u>
<input checked="" type="checkbox"/> 9	Salad — Vegetable	<u>4.80</u>
<input checked="" type="checkbox"/> 10	Dessert	<u>.40</u>
<input checked="" type="checkbox"/> 11	Milk	<u>.25</u>
<input checked="" type="checkbox"/> 11	Coffee	<u>1.00</u>
<input checked="" type="checkbox"/> 11	Tea	<u>1.00</u>
<input checked="" type="checkbox"/> 11	Juice	<u>1.00</u>
<input type="checkbox"/> 12	Misc.	\$2.00

*Includes salad or vegetable, juice, coffee, or tea.

Membership Acct. # 42007Signature 571eRoom No. 571eReceipt Requested

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8/7/78

STATEMENT

STATINTL

[REDACTED] 12-139



Please return this stub with your check

\$ _____

DATE	REFERENCE	CHARGES	CREDITS	BALANCE
SPECIAL PARTIES				

BALANCE FORWARDED

July 26, 1978

Dinner: 12 @ 8.95			
plus Tax	115.99		
Room Charge: B	20.00		
Cocktails:	47.95		
Parking: 1	<u>1.25</u>		
			\$185.19

12@16.14
12@18.00
20.00
47.95
1.25
185.19

		SPECIAL PARTIES		Please Pay Last Amount in This Column	
1. BARBER	7. BAR				
2. TOBACCO, ETC.	8. FOOD				
3. TELEPHONE	9. GUEST CHARGE	12. PRIVATE ROOM CHARGE	CM	CREDIT MEMO	
4. LODGINGS	10. CHRISTMAS FUND	13. FLOWERS	DM	DEBIT MEMO	
5. PARKING	11. MISC.	14. EXTRA HELP	CR	CREDIT BALANCE	
6. LAUNDRY		15. MISC.	GC	GUEST CHARGE	

CHARGES AND CREDITS NOT SHOWN ON THIS STATEMENT WILL APPEAR NEXT MONTH

COSMOS CLUB 2121 Massachusetts Avenue, N.W., Washington, D.C. 20008 DUPONT 7-7783

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Cosmos Club

PARKING CHARGE

Member

12-139
Account No.

Guest

JUL 26 1978

Parking Rates

Luncheon Period	\$1.25
Dinner Period	1.25
All Day	2.50

(While utilizing Club facilities)

Persons using parking lot should keep their cars locked. The Club is not responsible for articles left in cars. If requested, please leave your keys with the parking lot attendant, or at the front desk, with your name and Club number.

License No.

Space No.

Total Charges

STATINTL

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COSMOS CLUB		DINING ROOM
Account #		12-139
SIGNATURE _____		
<i>B. Roomcharge</i>		<i>20-</i>
<i>12</i>	<i>11khet 98.95</i>	<i>107.40</i>
Waiter Table No.	78	TOTAL
Persons	6	D.C. SALES TAX
		8.59
		GRAND TOTAL
		135.99
DATE:		

COSMOS CLUB		BAR CHECK	
Account #	12-139	SPECIAL BAR	
STATINTL	STATINTL	JUL 26 1978	
SIGNATURES			
4 Scotch	540		
5 Bourbon	675		
2 martini	270		
1/4 Gin	540		
5 Vodka	675		
4 Dubonnet	540		
3 Carafe of Wine	1200		
Waiter	TOTAL	44	40
SPECIAL BAR	D.C. SALES TAX	3	55
JUL 26 1978	GRAND TOTAL	47	95

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R STATINTL

WASHINGTON GOLF and COUNTRY CLUB
ARLINGTON, VIRGINIA 22207

DATE	SERVER	TABLE NO.	PERSONS	CHECK NUMBER
8-16 11270	12			79016

STATINTL 145
145

Chaplin "

$$\frac{180}{470}$$

145

.06 TAX

13 TII

166

720
60 & 11

DINING ROOM

-WASHINGTON GOLF and COUNTRY CLUB
ARLINGTON, VIRGINIA 22207

DATE	SERVER	TABLE NO.	PERSONS	CHECK NUMBER
8/16/78	Mang 6	4		5623
MEMBER NUMBER 11270				STATINTL

1	Filowader	5.50
2	S. S. Crepe	15.90
1	Veal & Callopinic	7.50
2	Strawberry Cheesecake	2.00

7.95 ~~key~~ 124
32 TAX ~~32.14~~

1.20 Bx 7in

1.7. C

~~666~~ ~~666~~ ~~666~~

19.75

~~Tell
a/c 50
9c~~

CLAIM FOR EXPENSES - Director's Science and Technology Advisory Panel

STATINTL

TRANSPORTATION: Economy air fare from [REDACTED] to Wash., DC
and return (ticket may be retained for return trip) T \$206.00

Date and time of departure: 7/25/78 - 5:30 p.m.

Transportation cost to terminal: 8.75 From Airport to Hotel: 4.50 T \$ 13.25

Daily Expenses (reimbursement may not exceed \$50.00 per day):

<u>7/25/78</u> (date)	Lunch - \$ --	
	Dinner - --	
	Hotel - 51.56	M \$ 51.56

<u>7/26/78</u> (date)	Breakfast - 2.50	
	Lunch - --	
	Dinner - --	
	Hotel - 51.56	M \$ 54.06

Transportation cost from hotel to Headquarters and return: T \$ 9.50

<u>7/27</u> (date)	Breakfast - 3.25	
	Lunch - --	
	Dinner - --	
	Hotel - 51.25 (not charged)	M \$ 3.25

Transportation cost from hotel to Headquarters and return: T \$ 9.00

<u> </u> (date)	Breakfast -	
	Lunch -	
	Dinner -	

Transportation cost to terminal: \$ -- From Airport to home: 8.50 T \$ 8.50
(estimates may be used for above)

Date and time of departure from Wash., DC: 7/28/78 - 6:15 p.m.

Fee for services (\$180.88 per day) claimed: (x) Yes () No T \$ 361.76

TOTAL CLAIM

711.26
\$716.88

STATINTL

STATINTL

Please mail check to:

(Signature of Claimant)

BEST COPY
Available

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Approved For Release 2001/03/04 : CIA-RDP80T04998A00010001000			
(LAST)	(NAME)	(FIRST)	(RATE-OUT DATE)
			TIME ARR. DATE TAX R CR NR
ROOM CLERK			

Approved For Release 2001/03/04 : CIA-RDP80T01198A000100010004-5

CLAIM FOR EXPENSES - Director's Science and Technology Advisory Panel

STATINTL

TRANSPORTATION: Economy air fare from [REDACTED] to Wash., DC prorated
and return (ticket may be retained for return trip) \$ 151.00

Date and time of departure: 24 July 78 0900

Transportation cost to terminal: 29.46 From Airport to Hotel: 11.33 \$ 40.78

Daily Expenses (reimbursement may not exceed \$50.00 per day):

25 July 78 (date)	Lunch - \$ 4.00	
	Dinner - 9.00	
	Hotel - 19.44	\$ 32.44

26 July 78 (date)	Breakfast - 2.20	32.44 total
	Lunch -	
	Dinner -	
	Hotel - 19.44	\$ 21.64
		21.64 total

Transportation cost from hotel to Headquarters and return: \$ 5.00

27 July 78 (date)	Breakfast - 2.20	
	Lunch -	
	Dinner - 9.00	
	Hotel - 19.44	\$ 30.64
		30.64 total

Transportation cost from hotel to Headquarters and return: \$ 5.00

(date)	Breakfast -	
	Lunch -	
	Dinner -	\$

Transportation cost to terminal: \$ 12.65 From Airport to home: \$ 12.65
(estimates may be used for above)

Date and time of departure from Wash., DC: 28 July 78 1700

Fee for services (\$180.88 per day) claimed: (X) Yes () No \$ 361.76

TOTAL CLAIM

\$ 660.91

STATINTL

Please mail check to:

(Signature of Claimant)

COSMOS CLUB

Room Charges

NAME [REDACTED]
Room No. 229
ARRIVED 24 JULY DEPARTED 28 JULY
3 DAYS \$ 18 00 PER DAY \$ 54 00
8% D. C. SALES TAX \$ 4 32
TOTAL \$ 58 32

STATINTL

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CALIFORNIA INSTITUTE OF TECHNOLOGY		STATINTL	TRIP TICKET							
REQUEST		DIVISION/DEPARTMENT	TEL. EXT.	DATE PREPARED						
		164-30		7-13-78						
TYPE OF VEHICLE	DATE REQUIRED & TIME	EST. DURATION	NAME OF OPERATOR	LIC. EXP.						
	7-24-78 7:30 AM	PM								
ODOMETER READING	DATE	TIME	CONDITION OF VEHICLE:							
ENDING			<input type="checkbox"/> OK	<input type="checkbox"/> NEEDS WORK (SPECIFY)						
BEGINNING										
TOTAL MILEAGE	TOTAL USAGE	DAYS HRS.								
CHARGES:	OPERATOR'S SIGNATURE			STATINTL						
MILES	@ \$	/MILE	\$							
DAYS	@ \$	/DAY	\$							
CHAUFFEUR HRS-ST	@ \$	/HR.	\$							
CHAUFFEUR HRS-OT	@ \$	/HR.	\$							
PARKING FEES, TOLLS/MEALS	\$	\$	\$							
TOTAL AMOUNT DEBITED TO ACCOUNT (S) \$			DISPATCHER'S SIGNATURE							
			APPROVED							
STATINTL										
DEBIT					CREDIT					
%	ACCOUNT	SUB ACCOUNT	SUF. 3 DIG.	SUF. 4 DIG.	AMOUNT	ACCOUNT	SUB ACCOUNT	SUF. 3 DIG.	SUF. 4 DIG.	AMOUNT
	248604-10452				\$ 9.67	338	99129			\$ 0.00
	248					338	71520	463		\$ 0.00
	248					268				
	248									
Home to TAX										
REQUESTER										

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CLAIM FOR EXPENSES - Director's Science and Technology Advisory Panel

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TRANSPORTATION: Economy air fare from [REDACTED] to Wash., DC
 xxxxxxxx (ticket may be retained for return trip) \$ 210.

Date and time of departure: 7:40a - 7/24/78

Transportation cost to terminal: _____ From Airport to Hotel: _____ \$

Daily Expenses. (reimbursement may not exceed \$50.00 per day):

<u>7/25/8</u>	Lunch - \$		
(date)	Dinner -	<u>21.00</u>	\$ 50.0
	Hotel -	<u>37.06</u>	\$ 58.6

<u>7/26/8</u>	Breakfast -	<u>4.25</u>	
(date)	Lunch -		
	Dinner -	<u>37.06</u>	\$ 41.3
	Hotel -		

Transportation cost from hotel to Headquarters and return: \$

<u>7/27/8</u>	Breakfast -	<u>4.25</u>	
(date)	Lunch -	<u>7.50</u>	
	Dinner -		
	Hotel -	<u>37.06</u>	\$ 48.6

Transportation cost from hotel to Headquarters and return: \$

<u>(date)</u> -	Breakfast -		
	Lunch -		
	Dinner -		

Transportation cost to terminal: \$ From Airport to home: \$
 (estimates may be used for above)

Date and time of departure from Wash., DC: a.m. 7/28/8

Fee for services (\$152.32 per day) claimed: () Yes (X) No \$

TOTAL CLAIM\$ 350.
\$ 358.

STATINTL

Please mail check to:

(Signature of Claimant)

STATINTL

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NAME COMPANY	CITY	STATE	ZIP
	NO OF GUESTS IN ROOM		
	R	CR	NR

Sheraton National Motor Hotel
COLONIAL PIKE & WASHINGTON AVENUE
ALEXANDRIA, VIRGINIA 22314
SHERATON HOTELS & INNS, WORLDWIDE

OTHER	CLOSING			CHANGE <input type="checkbox"/> ROOM <input type="checkbox"/> RATE	ROOM NO	RATE	TAX				
	OPENING										
	DIFFERENCE										
CALLS	MEMO	DATE	REFERENCE	CHARGES	CREDITS	BAL. DUE	PICK-UP				
MON.	1										
	2	JUL 25 ²	ROCK 710	C* 34.00							
	3	JUL 25 ²	TAX 710	C* 3.00							
TUES.	4	JUL 25 ²	PHONE 710	C* .30							
	5	JUL 26 ²	ROCK 710	C* 34.00							
	6	JUL 26 ²	TAX 710	C* 3.00							
WED.	7	JUL 26 ²	PHONE 710	C* .90							
	8	JUL 27 ²	LODGE 710	C* 5.00							
THURS.	9										
	10	JUL 27 ²	ROCK 710	C* 34.00							
	11	JUL 27 ²	TAX 710	C* 3.00							
	12	JUL 28 ² 1980	710								
FRI.	13										
	14										
SAT.	15										
	16										
	17										
SUN.	18										
	19										
	20										

GUEST'S SIGNATURE

CHARGE TO

ADDRESS

CITY STATE ZIP

LAST BALANCE IS AMOUNT DUE UNLESS OTHERWISE INDICATED.
BILLS ARE PAYABLE WHEN PRESENTED-RETAIN THIS RECEIPT.

REGARDLESS OF INSTRUCTIONS, GUEST IS ALSO LIABLE UNTIL BALANCE HAS BEEN PAID.



Sheraton
HOTELS & INNS, WORLDWIDE

STATINTL STATINTL GS.

SOLD SUBJECT TO CONDITIONS OF CONTRACT ON PASSENGER'S COUPON									
Issued By	UNITED AIRLINES			PASSENGER TICKET AND BAGGAGE CHECK PASSENGER'S COUPON			FROM	TO	016 580301707
STATINTL STATINTL									
NAME OF PASSENGER 1311-2-5421/2 10007418918									
NOT GOOD FOR PASSAGE				DATE OF ISSUE					
1	2	3	4	ORIGINALLY ISSUED AGAINST BY AGENT'S NUMERIC CODE AT ON DATE TR					
1	2	3	4	TICKET DESIGNATOR & TOUR CODE THIS TICKET ISSUED IN EXCHANGE FOR					
COUPONS NOT VALID AFTER									
FROM VOID				FARE BASIS	ALLOW	CARRIER	FLIGHT/CLASS	DATE	TIME
				F	UA	14U	24JUL	74CACK	
				F	UA	336	24JUL	330POK	
				S	PI	945	25JUL	430POK	
				FARE	PCN	UNCL. WT.	PCN	UNCL. WT.	PCN
				TAX	WT.	WT.	WT.	WT.	WT.
				COLV. AMT.	WT.	WT.	WT.	WT.	WT.
				85.50	52.40	705.00			
Approved For Release 2001/03/04 : CIA-RDP80T01198A000100010004-5									
016 5803017073 0									

CLAIM FOR EXPENSES - Director's Science and Technology Advisory Panel
STATINTL

TRANSPORTATION: Economy air fare from [REDACTED] to Wash., DC
and return (ticket may be retained for return trip) \$ 436.-

Date and time of departure: 1800 7/25/78

Transportation cost to terminal 8.50 From Airport to Hotel: 3.50 \$12.00

Daily Expenses (reimbursement may not exceed \$50.00 per day):

<u>(date)</u>	Lunch - \$ _____	\$ _____
	Dinner - _____	
	Hotel - _____	\$ _____
<u>(date)</u>	Breakfast - _____	
	Lunch - _____	
	Dinner - _____	
	Hotel - _____	\$ _____

Transportation cost from hotel to Headquarters and return: \$ 9.50

<u>(date)</u>	Breakfast - _____	
	Lunch - _____	
	Dinner - _____	
	Hotel - _____	\$ _____

Transportation cost from hotel to Headquarters and return: \$ _____

<u>(date)</u>	Breakfast - _____	
	Lunch - _____	
	Dinner - _____	\$ _____

Transportation cost to terminal: \$ 9.75 From Airport to home: 18.00 \$27.75
(estimates may be used for above)

Date and time of departure from Wash., DC: 1600 7/26/78

Fee for services (\$180.88 per day) claimed: () Yes () No \$180.88

TOTAL CLAIM \$ 666.13

STATINTL

Please mail check to:

Addition of billing

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Visit to [REDACTED]

for consultation on SIGHT plan

May 3, 1978

STATINTL

left [REDACTED] 0730

STATINTL left [REDACTED] 130 pm

taxis 12,5,5

22,-

air fare (one way)

28.10

fee ($\frac{1}{2}$ day) @ 180.88

90.44

140.54

I am not billing for 2-3 days total time at
studying reports.

STATINTL

[REDACTED]
7/31/78

STATINTL

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CLAIM FOR EXPENSES - Director's Science and Technology Advisory Panel

TRANSPORTATION: Economy air fare from _____ to Wash., DC
and return (ticket may be retained for return trip) \$ _____

Date and time of departure: _____

Transportation cost to terminal: _____ From Airport to Hotel: _____ \$ _____

Daily Expenses (reimbursement may not exceed \$50.00 per day):

Lunch - \$ _____
(date) Dinner - _____
Hotel - _____ \$ _____

Breakfast - _____
(date) Lunch - _____
Dinner - _____
Hotel - _____ \$ _____

Transportation cost from hotel to Headquarters and return: _____ \$ _____

Breakfast - _____
(date) Lunch - _____
Dinner - _____
Hotel - _____ \$ _____

Transportation cost from hotel to Headquarters and return: _____ \$ _____

Breakfast - _____
(date) Lunch - _____
Dinner - _____ \$ _____

Transportation cost to terminal: \$ _____ From Airport to home: _____ \$ _____
(estimates may be used for above)

Date and time of departure from Wash., DC: _____

Fee for services (\$180.88 per day) claimed: Yes No \$ 361.76

7/26 - 27

TOTAL CLAIM

\$ 361.76

Note:

Please mail check to:

STATINTL

(Signature of Claimant)

8-2-78

[REDACTED] STATINTL

Enclosed is the expense claim for Dr. [REDACTED] for the last STAP meeting. Please note that the ticket is L.A.-Washington-Boston-L.A. I requested reimbursement for LA-Wash-LA. The Boston trip was one he would not have made had he not already been in Washington.

Also, as usual, no hotel receipt is available. He is billed monthly.

Thanks so much.

STATINTL

STATINTL
[REDACTED]

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CLAIM FOR EXPENSES - Director's Science and Technology Advisory Panel

STATINTL

TRANSPORTATION: Economy air fare from [REDACTED] to Wash., DC
and return (ticket may be retained for return trip) \$ 414

Date and time of departure: 7-25-78 9:00 a.m.

Transportation cost to terminal: _____ From Airport to Hotel: _____ \$ _____

Daily Expenses (reimbursement may not exceed \$50.00 per day):

7-25 (date) Lunch - \$ _____
Dinner - _____
Hotel - 30.00 \$ 30.

7-26 (date) Breakfast - 2.75
Lunch - _____
Dinner - _____
Hotel - 30.00 \$ 32.

Transportation cost from hotel to Headquarters and return: \$ _____

7-27 (date) Breakfast - 3.15
Lunch - _____
Dinner - _____
Hotel - _____ \$ 3.

Transportation cost from hotel to Headquarters and return: \$ _____

(date) Breakfast - _____
Lunch - _____
Dinner - _____ \$ _____

Transportation cost to terminal: \$ _____ From Airport to home: _____ \$ _____
(estimates may be used for above)

Date and time of departure from Wash., DC: 7-27-78, 3:55 p.m.

Fee for services (\$180.88 per day) claimed: () Yes (✓) No \$ _____

TOTAL CLAIM

STATINTL

Please mail check to:

(Signature of Claimant)

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STATINTL

DEPARTURE			ARRIVAL		
DATE	AIRLINE	AIRPORT	TIME	AIRPORT	TIME
Jul 25	Row 7 seat 2 TWA 14		9:00 AM		4:49 PM
Jul 27	Delta 230		3:55 PM		5:03 PM
Jul 28	Row 7 seat 2 TWA 65		5:55 PM		8:35 PM
		STATINTL		STATINTL	

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STATINTL

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CLAIM FOR EXPENSES - Director's Science and Technology Advisory Panel

TRANSPORTATION: Economy air fare from _____ to Wash., DC
and return (ticket may be retained for return trip) \$ _____

Date and time of departure: _____

Transportation cost to terminal: _____ From Airport to Hotel: _____ \$ _____

Daily Expenses (reimbursement may not exceed \$50.00 per day):

(date) Lunch - \$ _____
Dinner - _____
Hotel - _____ \$ _____

(date) Breakfast - _____
Lunch - _____
Dinner - _____
Hotel - _____ \$ _____

Transportation cost from hotel to Headquarters and return: _____ \$ _____

(date) Breakfast - _____
Lunch - _____
Dinner - _____
Hotel - _____ \$ _____

Transportation cost from hotel to Headquarters and return: _____ \$ _____

(date) Breakfast - _____
Lunch - _____
Dinner - _____ \$ _____

Transportation cost to terminal: \$ _____ From Airport to home: _____ \$ _____
(estimates may be used for above)

Date and time of departure from Wash., DC: _____

Fee for services (\$180.88 per day) claimed: () Yes () No \$ 180.88

TOTAL CLAIM

STATINTL

STATINTL

Please mail check to:

(Signature of Claimant)

-RDP80T01198A000100010004-5

(When Filled In)

**REQUEST FOR REIMBURSEMENT
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					1. VOUCHER NO.
					2. DATE
					3. NAME OF CLAIMANT (LAST, FIRST, MIDDLE INITIAL)
25X1A					4. EMPLOYEE NO.
					Detailer
					5. OFFICE
PAYABLE TO		ROOM	BUILDING	EXTENSION	AMOUNT
		6F35	Hqs.	4170	\$12.74
6. PROJECT NUMBER		7. TYPE OF ADVANCE		8. ACTIVITY NUMBER	
25X1A					
9. DUE DATE					
PURPOSE (FIRST 24 CHARACTERS OF EACH LINE WILL BE ENTERED):					
10. WHAT: Donuts and Coffee					
11. WHERE: Rm. 6E25, CIA Hqs.					
12. WHEN: 26-27 July 1978					
13. WHY: Representational Operational entertainment of non-government personnel (STAP)					
16. OBLIGATION REFERENCE NO.				14. EXP CODE	15. AGENCY CODE
I CERTIFY FUNDS ARE AVAILABLE					
TYPE ORN	SUB #	17. SOC	LIQ CD	18. AMOUNT	DATE AUTHORITY
P	1			25X1A	8/22/78
S	1			25X1A	DATE AUTHENTICATION
S	1				DATE
S	1			25X1A	DATE CERTIFICATE FOR PAYMENT OR CREDIT
8/22/78					
DESIGNATION OF AGENT TO PICK UP FUNDS					
I authorize my agent, whose signature appears below, to receive \$ _____ of official funds on my behalf and acknowledge receipt of such funds and my responsibility therefor, when paid to my agent.					
DATE SIGNATURE OF AGENT					
DATE SIGNATURE OF CLAIMANT OR OFFICER					
ACKNOWLEDGEMENT OF RECEIPT					
AMOUNT				CHECK NO.	
DATE	SIGNATURE				
17 AUG 78					
TRANS CODE	CODING AREA			MONETARY CONTROL	AMOUNT
015	10900800200900/1/Partain, NEAC				12 74
DATE	PREPARED BY	EXT	DATE	REVIEWED BY	TOTAL
8/22/78	[REDACTED]	25X1A	6/27/78	[REDACTED]	12 74
Approved For Release 2001/03/04 : CIA-RDP80T01198A000100010004-5					

Approved For Release 2004/03/04 : CIA-RDP80T0198A000100010004-5

	UNCLASSIFIED	CONFIDENTIAL	SECRET
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OFFICIAL ROUTING SLIP

TO	NAME AND ADDRESS	DATE	INITIALS
1	Administrative Officer/DCI 7C17 Headquarters		
2	Attn: [REDACTED]		
3	STATINTL		
4			
5			
6			
ACTION	DIRECT REPLY	PREPARE REPLY	
APPROVAL	DISPATCH	RECOMMENDATION	
COMMENT	FILE	RETURN	
CONCURRENCE	INFORMATION	SIGNATURE	

Remarks:

Per memorandum dated 16 February 1978.

Subject: Official Representation Expenses
for DCI's Science and Technology
Advisory Panel (STAP).

FOLD HERE TO RETURN TO SENDER

FROM: NAME, ADDRESS AND PHONE NO.	DATE
EXECUTIVE Secretary, STAP Rm. 6-F-35 Hqs. - Ext. 4170	17 AUG 1978
UNCLASSIFIED	CONFIDENTIAL
SECRET	

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